

# **PART B - FEES(S) TRANSMITTAL**

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1933 7590 05/11/2011  
**HOLTZ, HOLTZ, GOODMAN & CHICK PC**  
220 Fifth Avenue  
16TH Floor  
NEW YORK, NY 10001-7708

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<b>B. VILLANT</b>	(Depositor's name)
<i>B. Villant</i>	(Signature)
<b>EFS 8/8/11</b>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/594,375	07/02/2007	Hiroaki Adachi	06499/1H	9444
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**TITLE OF INVENTION: PROCESSING METHOD FOR ORGANIC CRYSTAL, PROCESSING DEVICE FOR ORGANIC CRYSTAL, AND OBSERVING DEVICE FOR ORGANIC CRYSTAL**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEES DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	08/11/2011
EXAMINER	ART UNIT	CLASS-SUBCLASS				
KUNEMUND, ROBERT M	1714	117-080000				

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.302):
- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list
- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, \_\_\_\_\_
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. \_\_\_\_\_
- HOLTZ, HOLTZ, GOODMAN & CHICK, PC**

**3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)**

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE (CITY and STATE OR COUNTRY)

**SEE ATTACHED SHEET FOR SEVEN ASSIGNEES**

Please check the appropriate assignee category or categories (will not be printed on the patent): ☒ Individual ☒ Corporation or other private group entity ☐ Government

**4a. The following fee(s) are submitted:**

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
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- ☒ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number **06-1378** (enclose an extra copy of this form)

**5. Change in Entity Status (from status indicated above)**

- ☒ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature \_\_\_\_\_  
Typed or printed name **Leonard Holtz**

Date **8/8/11**  
Registration No. **22,974**

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U.S. SERIAL NO. 10/594,375  
H. ADACHI et al  
Our Reference: 06499/LH

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